

**EXECUTIVE LOBBYING  
REGISTRATION/ RENEWAL FOR  
THE YEAR OF \_\_\_\_\_**

(Fill in year.)

**Instructions**

- Print in ink or type.
- Complete form and return with \$110 registration fee to the Board of Ethics, 3415 Quail Dr., 3<sup>rd</sup> Floor, Baton Rouge, LA 70808, (225) 763-8777 or (800) 842-6630.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Registrations expire as of December 31 unless a renewal is submitted between December 1 and January 31.

1. NAME BARHAM CHARLES CLEM  
Last First MI

2. BUSINESS PHONE 318-865-7816  
Area Code and Phone Number

3. FAX NUMBER N/A

4. BUSINESS ADDRESS PO BOX 6244 SHREVEPORT LA 71106  
Street and No. City State Zip

MAILING ADDRESS PO BOX 6244 SHREVEPORT LA 71106  
Street and No. City State Zip

5. EMPLOYER SELF

6. EMPLOYER'S ADDRESS N/A  
Street and No. City State Zip

7. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name CENTERPOINT ENERGY

Address P.O. BOX 4567 HOUSTON, TX

Business or purpose PROVIDING, SALE + DISTRIBUTION OF NATURAL GAS

Does this person pay you? YES

If No, who pays you? \_\_\_\_\_



**FOR OFFICE USE ONLY**

Postmark Date: 12-26-06

Renewal 2007

Fee 110.00

Signature Wm.

3061519

2006 DEC 28 AM 11:11

RECEIVED  
CLERK OF COURSE  
COMMISSION

RW: 2/10/10

# EXECUTIVE LOBBYING REGISTRATION FORM

Executive Lobbyist Registration No. _____
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2. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_
3. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_
4. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_

## CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by LSA-R.S. 49:71 et seq. has been deliberately omitted.

Charles C. Barham  
Signature of Lobbyist

ATTACH  
2" x 2"  
PHOTOGRAPH  
HERE